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PREVENTION  
OF  
CONTAGIOUS DISEASES.



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Association for Promoting the Extension of  
The Contagious Diseases Act, 1866,  
To the Civil Population of the United Kingdom.

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## REPORT

ON THE

EXTENT OF VENEREAL DISEASE;

ON THE

OPERATION OF THE CONTAGIOUS DISEASES ACT,

AND THE MEANS

OF CHECKING CONTAGION.

WITH APPENDIX.

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# REPORT.



## SECTION I.

### OBJECTS OF THE ASSOCIATION.

1. This Association has been formed to promote the Extension of the principle of the Contagious Diseases Act of 1866 to the civil population.

2. It holds that sufferers under any kind of contagious disease are dangerous members of society, and should, so long as they are in this state, be prevented from communicating it to others.

3. It desires to impress upon the public the necessity of regarding the venereal disease as a contagious disease of the gravest character, which is constantly transmitted from parent to offspring\*; and proposes to remove those affected with it from opportunity of propagating their disorder.

4. It aims at the moral and social improvement of a numerous and degraded class.

5. In carrying out these objects it is opposed to the system of licensing prostitution which prevails in some parts of the Continent.

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## SECTION II.

### EXTENT OF VENEREAL DISEASE.

6. The researches of the Committee shew that the extent of this disease is very imperfectly known to society.

Prevalence of  
venereal disease  
very great.

\* See Appendix, No. I.

The number of out-patients applying for relief at the London Hospitals, has been published in the Harveian Society's report for 1867, on this subject\*.

One-third to one-fifth of Hospital out-patients suffer from venereal disease.

Diseases of the eye and skin attributable to venereal disease.

Fifteen per cent. of disease in the throat venereal.

Orphan infants infecting their foster mothers.

7. At St. Bartholomew's Hospital, about one-half of the surgical out-patients are venereal. At Guy's, about forty-three per cent. of all the out-patients suffer from this kind of disease. At the other hospitals the proportion of venereal patients is between one-fifth and one-third of the whole number seeking relief. At the Hospital for diseases of the Skin, one in eight of all the patients suffer from maladies traceable to venereal causes. At the Royal London Ophthalmic Hospital, Mr. Hutchinson, reports that one in five of the diseases of the eye are of venereal origin. At the Central London Ophthalmic Hospital, Mr. Spencer Watson has collected, in a short time, fifty cases of a peculiar disorder of the eye in young persons, which is now generally acknowledged to be a consequence of syphilis inherited from their parents. At St. Mary's Hospital, Mr. Ernest Hart has found that one-tenth of the diseases of the eye which come under his care are due to syphilis, and one-fourth of the latter are hereditary forms. Many of his patients are respectable and innocent married women. At the Hospital for Diseases of the Throat, Dr. Morell Mackenzie has noted the cause of their affection in 626 patients in the order of their application; in 93 the disease was syphilitic. Thirty-one of the patients were married women, of whom several had clearly contracted the disease from their husbands. Other patients had inherited their disorder, of whom one had permanently lost his voice by this means.

8. The Glasgow Parochial Board during the last three years placed out 251 orphans, of these, though all were

\* See Appendix, p. 21.



apparently healthy when intrusted to their foster-mothers, thirty-eight subsequently sickened of the disease they had inherited from their parents, and two of them infected their nurses with it\*.

At the Hospital for Sick Children, 174 patients were treated in 1866, for the immediate consequences of syphilis; how many suffered from consequences remote, but clearly attributable to this cause, the hospital records do not shew.

Number of children afflicted very great.

9. Sir William Jenner, F.R.S. has pointed out in his address to the Epidemiological Society, the frequency with which syphilis originates disease of the liver, of the kidney, and of the brain; and how much of the so-called consumption is directly referable to syphilis. Still more numerous are the cases of so-called scrofulous disease in children, really due to syphilis inherited from the parents. "Syphilis," he says, "often means death,—death to the contractor of the disease, —death to his offspring†."

Inherited disease.

10. Dr. Robert Barnes, Physician-Accoucheur of St. Thomas's Hospital, relates instances‡ of women infected with this disease, losing child after child, until their prospect of rearing offspring is destroyed. This gentleman has also mentioned that a midwife was infected from one of her patients, and being herself pregnant at the time, not only lost her child, but had her life seriously jeopardized through this cause.

11. At the Lock Hospital, Mr. Berkeley Hill reports, that of the female out-patients who attended that institution during the last three months of 1867, thirty-six per cent. were married women, infected with venereal disease by their husbands, or in a manner wholly devoid of blame to themselves§.

Respectable married women suffering from the disease.

\* See Appendix, p. 24.

† See Appendix, p. 24.

‡ See Appendix, p. 26.

§ See Appendix, p. 23.

Surgeons infected  
by the disease.

12. Mr. James Paget, F.R.S.\* informs the Association he has in his own practice known five surgeons die, and at least fifty who have suffered more or less severely, from the effects of syphilis contracted in the performance of their professional duties.

Venereal disease  
in the army.

13. In the home army of 73,000 men, there were 68,600 admissions to hospital in 1865; 20,600 of these were for venereal disease†.

Mortality from  
Syphilis.

14. The Registrar-General's returns for 1866 give 408 deaths from syphilis in that year. The great majority of these are children. This number, great as it is, gives no idea of the real amount, as from the shame attaching to this disease, it is assigned as a cause of death in public practice only, and seldom or never in private practice.

Number of  
diseased women  
applying to the  
Rescue Society  
and Magdalen  
Hospital.

15. The Rescue Society has furnished to the Association the following particulars. In one year, 1050 women were either admitted or applied for relief, of these 314 were then, or had been previously, diseased. At the Magdalen Hospital (where applicants are at once cautioned that they cannot be admitted if diseased), in 1866, 284 women were examined previous to being sent before the committee; forty-five of them were rejected for being diseased; 131 were admitted in an apparently healthy state, of these fourteen afterwards shewed symptoms of disease.

Venereal disease  
penetrates to all  
classes.

16. It must not be supposed that venereal disease is limited to the poorest and most destitute of the vicious class; its effects are more terrible to them on account of their helplessness, but the disease affects sooner or later most women who permit indiscriminate intercourse, and from them it is unhappily carried into the families of all ranks and stations. The more

\* See Appendix, p. 25.

† Medical Reports of the Army, 1865.

prosperous can with comparative ease obtain medical treatment and support, while they are out of health, but their recklessness and their ignorance of the nature of their malady are so great, that little heed is taken even by them to prevent the spread of these complaints. The more destitute,—being unable to relinquish the calling which provides them with the necessities of life,—habitually postpone all means of cure till compelled by severe suffering to seek for help.

17. To include all the proof this Association has collected, respecting the wide extent to which this disease is spread among all classes, would overload this Report. The foregoing data are precise, and will enable the public to estimate with sufficient nearness the gravity of this evil.

### SECTION III.

#### EFFICACY OF PREVENTION.

18. The spread of these diseases is easily checked by precautionary measures, which need not, either unfairly interfere with the liberty of the subject, or promote and foster the immorality which so largely infests our towns.

Contagious diseases easily restrained within narrow limits.

19. At some colonial stations preventive measures have been established, and with varying results.

20. In 1857, an ordinance was passed in Hong Kong which placed the brothels frequented by Europeans under police supervision. Hospital accommodation was provided for diseased women, in which they were compelled to remain until restored to health; and a surgeon was appointed to examine the women practising prostitution from time to time. The results of these measures were for a time marvellous; the amount of venereal disease among all classes of society diminished to a great extent, and the

Efficacy of preventive measures at Hong Kong.

improvement in the condition of the soldiers and sailors was very marked. In course of time, the Chinese brothel-keepers found they could evade the ordinance in various ways, as the regulations were not made general to all prostitutes, but only to those who associated with Europeans. In 1866-7, the Secretary for the colonies urged upon the Hong Kong Government the adoption of measures similar to those of the Contagious Diseases Act of 1866; and an inquiry was held at Hong Kong into the causes which rendered the existing ordinances nugatory. The Attorney-General for Hong Kong, in his report, insists strongly on the very limited extent to which the measure was made applicable in that colony, and states that the committee, who prosecuted the inquiry ordered by the local government, were strongly in favour of preventive measures being enforced in every brothel or place of resort of prostitutes. In a short time, we understand, very sufficient regulations of this kind will be enforced at Hong Kong.

Corfu.

21. Sir Henry Storks, K.C.B., when Lord High Commissioner of the Ionian Islands, instituted measures at Corfu, Zante, and Cephalonia, where venereal disease was causing much mischief among the troops, with, to use his own words, such "happy results that the disease may be said to have almost entirely disappeared from these islands\*."

Malta.

22. In Malta, the same gentleman was also governor. He reports, on 12th April, 1865, the garrison numbered 6192 men; the whole number of men suffering with venereal disease was five. On that day a regiment landed from Dublin. This regiment brought nineteen cases of contagious disease into hospital, and within a week after its arrival the number was increased to thirty-eight, by the addition of cases undetected during the voyage. On 1st

\* See Appendix, p. 28.

July, another regiment came also from Dublin, bringing sixteen cases, which, in the course of a week, was increased to twenty-three from this regiment alone. Notwithstanding this addition of contagious disease, the speedy separation of the infected prevented the disease from spreading, so that on 21st October, the whole garrison afforded but eight cases of venereal disorder\*.

23. The Act passed by Parliament in 1866, known as the Contagious Diseases Act of 1866, to lessen venereal disease in the army and navy, has been set in operation in Plymouth, Portsmouth, Chatham, Sheerness, and Woolwich, and during the past summer, also at Aldershot. The results are already sufficiently encouraging to decide the Government to extend its action to Colchester, Windsor, and Shorncliffe, in England, and to Queenstown, Cork, and the Curragh, in Ireland.

Effect of Act in  
Dockyard towns.

24. In order to furnish the public with exact information respecting the benefit of the preventive measures already adopted, one of the Honorary Secretaries of the Association, Mr. Berkeley Hill, has visited Chatham, Portsmouth, Plymouth, Aldershot, Windsor, and Winchester†. By conversing with the surgeons, the police, and others engaged in carrying into effect the provisions of the Act, and by examining official reports, opened most willingly for his inspection, he has been able to furnish detailed accounts, both of the results already obtained by the operation of the Act, and also of those obstacles which hitherto have prevented its success being even more marked than as yet its operation has displayed. A narrative of his investigations has been published in the British Medical Journal for December 28th, 1867, and January 11th and February 1st, 1868.

\* See Appendix, p. 28. See also Adm. Sir W. Fanshawe Martin's and Mr. Sloggett's Evidence, p. 30 of Appendix.

† For an abstract of these Reports see Appendix, p. 32.



Improvement in  
the health of the  
Navy.

25. In the Statistical Abstract of the health of the Navy, ordered by the House of Commons to be printed August 5th, 1867, page viii., there is a table of the number of cases of syphilis treated in the Marine Infirmary, and in the Naval Hospital, at Plymouth, during the years 1864-5-6 and first half of 1867. During the first six months of 1864 the ratio per 1000 was 129·7; through the other half-yearly periods the proportion of the disease fell till in the first six months of 1867 it was as low as 49·3 per 1000\*.

Remarkable  
success at  
Sheerness.

26. Peculiar circumstances have caused the result of the Act to have been most successful at Sheerness, where contagion is now habitually restrained within narrow limits. This district is shut off from communication with other places to some extent. The military and naval population there is tolerably stationary, hence the occurrence of fresh importation is rare; though on one occasion, the arrival of fresh troops, among whom were some diseased men, made a marked impression on the health of the district†.

Free communi-  
cation between  
localities fatal to  
success of Act in  
limited districts.

27. The main difficulties in the way of complete success have been, the very small area over which these measures are applied, insufficient hospital accommodation, and the consequent impossibility of completely carrying out the examination of the women required by the Act. Further, the prospect of obtaining medical treatment in the protected districts attracts women of abandoned character thither, in order to regain their health in the hospitals provided for such persons‡. At Winchester, one of the brothel-keepers sends away the sick women to Portsmouth when the severity of their malady renders them incapable of adding to the gains of her trade§.

\* See tables in Appendix, pp. 45 and 35, 39. † See table in Appendix, p. 45.

‡ See Appendix pp. 34, 37.

§ See Appendix, p. 42.

28. This rapid re-introduction of disease from unprotected districts to protected ones is a strong argument for applying preventive measures to all places in which these diseases are likely to be propagated\*.

29. Excellent proof of the success that follows preventive measures, in diminishing the severity of venereal disease has just been published by Mr. James Lane, the senior surgeon to the Lock Hospital†.

Mitigation of the severity of the disease.

## SECTION IV.

### MEANS OF CONTROL.

30. The Association considers that the best means of diminishing the spread of venereal disease is to employ restrictive measures similar in principle to those now enforced in Portsmouth, Plymouth, and other places, under the Contagious Diseases Act of 1866.

Means for controlling the spread of contagious disease.

31. By an Act passed last session, entitled "An Act to make the Poor-Law Board permanent and to provide sundry Amendments," power is given to boards of guardians, in London and the country, to retain any person suffering with venereal disease, "so long as he is not in a proper state to leave the workhouse without danger to himself or others." The Association desires to direct attention to this important recognition by the Legislature of the necessity for prevention‡.

32. For the reception of prostitutes suffering from venereal disease, Hospital accommodation should be provided in all towns where such persons congregate.

Hospitals.

33. Common prostitutes should be subject to a compulsory periodical medical examination, and to compulsory detention in hospital as often as they are found diseased, and as long as they continue so.

Compulsory periodical examination.

\* See Appendix, pp. 38, 41, 45. + See Appendix, pp. 46, 39, 41.

‡ See Appendix, p. 47.

Proper  
occupation.

Certified homes.

The Act would  
meet no  
resistance from  
the women.

Legalising  
prostitution  
should be  
avoided.

34. The period of detention in hospital should also be profitably occupied ; those inmates whose health permits should be employed in work likely to encourage habits of honest industry after they leave the hospital. Certified homes or asylums should be connected with the hospitals, where the patients might enter when restored to health, to learn an occupation by which to maintain themselves after they have gained a character for honesty, sobriety, and industry. The experience gained in working the Act shews that the women themselves would aid voluntarily in giving effect to these provisions\*. In the investigations at Chatham, Portsmouth, and Plymouth, it was found that not more than one or two women objected to the Act. Most of them now regard its regulations as the natural order of their lives, they have never known of different arrangements, and would sorely feel any interruption to its working†.

35. The Association is opposed to the Continental system of licensing prostitutes and brothels ; and is of opinion that nothing resembling a certificate of health should be given to the women themselves, either after their medical examination or on their discharge from hospital.

## SECTION V.

### MORAL AND SOCIAL EFFECTS OF PREVENTION.

Act improves the  
moral and social  
condition of the  
women.

36. A collateral but not unimportant result which inevitably follows the establishment of preventive measures, is the improvement in the moral and social condition of persons of this class. The frequent visits of the police selected for the purpose, afford the women access to honest and trustworthy persons, who have the

\* See Appendix, pp. 33, 36, 40.

† See Appendix, p. 40.



means and the will to aid them in any efforts towards abandoning their calling\*. Still more is this latter result shewn among the patients when in hospital. A fair proportion are returned to their friends, and many remain in respectable employment. At Devonport, between April, 1865, and September, 1866, 469 women were sent to hospital, 132 of them were either returned to their friends or passed to penitentiary asylums, whence many have entered on a sober and meritorious life. The Rev. G. H. Bailey, Chaplain of St. Bartholomew's Hospital, Chatham, also has expressed a very strong opinion on this subject†.

A proportion of women return to honest occupation.

37. Important corroboration of the healthy moral influence of the Contagious Diseases Act is obtained from the letter of the rector of Chatham‡, in which he states that the practical observation of the effect of the Act at Chatham induced the beneficed clergy of that town, where it has been in operation for nearly three years, to urge its adoption in other places.

Clergy at Chatham strongly approve of Act.

38. At a meeting of the Clergy and laity of Reading, the chaplain of the camp at Aldershot explained the operation and effect of the Contagious Diseases Act in that place, and it was unanimously resolved to support this Association in asking for its extension. Several of the leading Clergy of Bath also resolved at a meeting to support this movement.

Meetings of Clergy at Reading and Bath.

39. The Clergy and gentry of Winchester§ petitioned Parliament to include their town in the Schedule to the Act of 1866, but their petition was presented too late to attain their object.

Winchester.

40. In Plymouth, it was not unknown for prostitutes to die unheeded in the houses where they lived when stricken by fever or other illness. At

Degradation.

\* See Appendix, pp. 35, 39, 40.

† See Appendix, p. 48.

‡ See Appendix, p. 48.

§ See Appendix, p. 43.

Aldershot, before the Act was set in operation, it was common for women to camp out under hedges, subsisting on the scraps given them by the soldiers.

Street solicitation  
checked.

41. The Association desires the suppression, by police regulations, of the open profligacy of the streets, which offers so great a temptation to the young and thoughtless. This has resulted from the operation of the Contagious Diseases Act at Plymouth\*.

42. The advantage of police interference is marked at Paris, where however a system of repression is enforced which has tendencies in many respects different from those advocated by this Association. In the years 1860-1-2-3, 1934 women were arrested for practising clandestine prostitution ; these were mostly young girls recently led astray, but whose better feelings were not yet obliterated ; of this large number, 1125 were restored to their friends†.

43. The development of the Association has made very satisfactory progress, owing to the assiduity of one of the Honorary Secretaries, Mr. Curgenvin, who has undertaken the task of organisation and correspondence. The collection of information has been more especially the charge of the other Honorary Secretary, Mr. Berkeley Hill, who has also prepared the draft of this report. To both these gentlemen the Central Committee desires to express its acknowledgments. Branch Associations are formed, or forming, in thirty-two of the principal provincial towns, to many of which Vice-Presidents and Honorary Secretaries have been nominated, and nearly 400 members are already inscribed.

\* See Appendix p. 39.

† Official information furnished to the Committee on Contagious Diseases, Army and Navy, p. 49 of Appendix.

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# APPENDIX.

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No. I.

## INJURY CAUSED BY SYPHILIS TO THE HEALTH OF THE POPULATION.

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DATA TO SHEW THE ENORMOUS PREVALENCE OF VENEREAL  
DISEASE AMONG THE POPULATION OF LARGE TOWNS.

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EXTRACT from the Report of the Committee of the Harveian Medical Society  
of London on the prevalence of Venereal Disease, 1867.

The damage inflicted on the general population by contagious venereal diseases is enormous, and it would not, perhaps, be too much to say, that no diseases of a preventible character cause greater evils among society at present in this country than these do. Thus, the report of Mr. Coote, surgeon to St. Bartholomew's Hospital, shows that an average daily number of 174 venereal cases is seen in that institution, or about half of the surgical out-patient cases. The report from Guy's Hospital, by Dr. Steele, shows that about 43 per cent. of all the out-patients seen annually are venereal. Mr. Cooper Forester says, that of 295 surgical out-patients seen by him in May, 1867, in Guy's Hospital, 174 were venereal and 121 non-venereal. The Royal Free Hospital, London, sees daily 117 cases of venereal disease, or three-eighths of its surgical cases are venereal. At the Hospitals of King's College, University College, St. Mary's, Westminster, London, Middlesex, and the Metropolitan Free, the number of venereal cases varies from one-third to one-fifth of the out-patient surgical cases daily seen at these hospitals. The London Lock Hospital sees daily 179 males and 45 female out-patients. At the *Dreadnought* Seamen's Hospital, London, about fifty cases of venereal disease are seen daily among the sailors of the mercantile Marine, who are much infected by it. In the Ophthalmic Hospital of Moorfields, one-fifth of the cases of eye disease among the out-patients are reported by Mr. Hutchinson as being caused by syphilis.

Proportion of  
Hospital  
out-patients with  
Venereal Disease.

The effect of syphilitic diseases upon the health of children was shewn by the report from the Hospital for Sick Children, Ormond Street. In 1866, 174 children were affected with syphilis, out of 1007 surgical cases seen, or about one-fifth. In hospitals and dispensaries for the treatment of skin diseases, from one-eighth up to four-fifths of the cases are reported by Mr. Hunt and others to be secondary syphilitic eruptions.



Inadequate  
accommodation.

There are very few beds for venereal patients in London. Thus, the Lock Hospital has 15 beds for males, and only 30 beds available for poor women or prostitutes afflicted with even the gravest affections, and according to Mr. James Lane and Mr. Gaseoyen, the institution is constantly compelled to send away applicants, even with large ulcerations of the genitals, or want of room. Guy's Hospital has 56 beds for venereal patients, 25 for men, and 30 for women. St. Thomas's Hospital has sent no report, but used to have, according to Dr. Vintras, 65 beds for venereal patients, of which 25 were for women, before the hospital was removed from its ancient site. The Royal Free Hospital has 26 beds for female cases; and women are daily sent away, suffering from the most contagious forms of disease. The Middlesex Hospital has only 11 beds for female venereal cases. Venereal cases are not admitted into St. George's Hospital, nor into St. Mary's, nor University College, nor many other of the London hospitals, as a rule. There are not more than a dozen beds for female venereal cases in the London Hospital, which has no less than 450 beds, and is located in a poor and teeming neighbourhood, much infested with venereal diseases. Hence, St. Bartholomew's Hospital, which has 25 beds for men, and 56 for women with venereal disease, is much frequented by the women from Whitechapel and the East-end, in which localities there is most urgent need of female Lock accommodation.

150 beds for  
3,000,000 persons.

There are thus, in the whole of London, with a population exceeding 3,000,000, probably not much more than 150 beds in hospitals available for prostitutes, or poor women with contagious venereal diseases. Now, in 1865, there were in London, according to the Police Reports, entitled "Judicial Statistics" close upon 6000 prostitutes, well-known to the police, and classed by them with thieves, and other bad characters. This, however, probably does not include more than one-third of those who gain their living by prostitution, and as a very great proportion of these are diseased, it can well be imagined how inadequate the supply of beds is for this population, all of whom are spreading far and wide the evils of contagious venereal disease.

Workhouses  
take few in.

The Workhouses of London do not, except to a very limited extent, take in prostitutes, when suffering from these diseases but send them off to the very inadequate number of beds provided for them in the Lock and other charitable institutions. Thus, the Strand Workhouse, the Whitechapel Workhouse, the City of London Workhouse, the Paddington Workhouse, St. Olave's Workhouse, Lambeth Workhouse, Shoreditch Workhouse, St. Martin's Workhouse, Hackney Workhouse, Bethnal-green Workhouse, St. Luke's Workhouse, St. Giles' Workhouse, and Newington Workhouse, do not seem, collectively, to devote above three dozen beds to the reception of female venereal cases, but send off such applicants to the Lock Hospital, (to which they subscribe certain sums annually), to the Royal Free, or St. Bartholomew's or Guy's Hospital, to struggle for admission with a host of unfortunate applicants, many of whom being rejected, are forced to go on with their trade in order to live.

Many hospitals  
refuse also.

At many dispensaries and hospitals in London and the provincial towns no venereal cases are admitted. Thus, St. George's, St. Mary's, University College Hospitals, and others, do not profess to treat such cases. Mr. Jackson reports that there are no beds for such cases in the South Staffordshire



Hospital. The Portland-town Free Dispensary says it is one of the rules that no venereal patient is to be admitted to the benefits of the charity. Islington Dispensary, likewise, has scarcely any venereal patients. Other dispensaries again, as the Farringdon Dispensary, London, according to Mr. Dunn, report that as much as one-eighth of the surgical cases are venereal. The report from the Nottingham General Hospital says that "local venereal affections are seldom seen; a certain class of practitioners and the quacks get hold of them all." In the Hull General Infirmary there are no beds for such cases, as also in the Dumfries General Hospital. The consequence of these regulations of the Committees of the various Hospitals, of course, is, that a vast number of cases of venereal diseases in all of our large towns remain untreated, and thus contagion is propagated on all sides. Similar absence of hospital accommodation is reported from many other large provincial towns.

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### SYPHILIS FROM PARENTS TO CHILDREN.

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*Extract from the Report of the Committee on the Venereal Disease in the Army and Navy.*

"A few words must be said on hereditary syphilis. A large number of <sup>Inherited</sup> cases of abortion and of still births arise from the children being affected <sup>Syphilis.</sup> with the syphilitic taint; and even if the infant be born alive and apparently well, the existence of the taint may become manifest in a few weeks. At the end of about a twelvemonth these symptoms may disappear; it was, until <sup>Early.</sup> quite recently, supposed that all traces of hereditary syphilis had then departed, but this is by no means invariably the case; the poison may be latent, and again exhibit its virulence during growing youth. Thus, children <sup>Late.</sup> who have been the subjects of hereditary syphilis in infancy may not only exhibit the previous effects of disease, but may suffer from fresh outbreaks in an active form, such as an acute ulceration of the throat and freshly formed nodes on the bones. The most remarkable affection which may occur at this period appears peculiar to the hereditary form of the disease—a cloudiness of both corneæ of the eye, technically known as *interstitial keratitis*. At the same time that these recent effects of the poisonous principle are seen, the changes that occur in infancy at once characterise the nature of the disease; thus, very often the whole body is puny, the forehead projects, the nose is flattened, the skin around the mouth is often puckered from old ulcerations, and lastly, and most important, a peculiar change takes place in the teeth, <sup>Teeth.</sup> the incisors being dwarfed in size, narrowed, rounded, and notched."

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### MARRIED WOMEN AT THE LOCK HOSPITAL.

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The estimated 36 per cent. does not include all the women who accused their husbands of giving them disease, but only those whose antecedents and symptoms satisfied Mr. Berkeley Hill on the mode in which disease was communicated to them.

Orphans.

## ORPHANS INFECTED WITH SYPHILIS.

OFFICE OF PAROCHIAL BOARD,

GLASGOW, 15th January, 1868.

DEAR SIR,

In reply to your note, I have to state that we placed out the following orphans in the last three years, namely:—

In 1865	..	..	..	74 ; cases of syphilis	..	..	..	12
„ 1866	..	..	..	79 ; „ „	..	..	..	7
„ 1867	..	..	..	98 ; „ „	..	..	..	19
<hr/>								
Total	..	..	..	251 ; „ „	..	..	..	38

The two most serious cases are where we gave out orphan infants, to married women who had lost their own babies, to bring up at the breast. The infants in each case appeared clean and healthy, but in a short time disease appeared, the nurses' breasts became affected, and before they knew what was the matter, the women were seriously diseased.

I am, dear Sir, yours truly,

EBENR. ADAMSON, *Inspector.*

BERKELEY HILL, Esq.

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EXTRACT from the OPENING ADDRESS to THE EPIDEMIOLOGICAL SOCIETY in November, 1866, by the President, Sir WILLIAM JENNER, Bart. M.D. F.R.S. Physician in Ordinary to HER MAJESTY THE QUEEN, &c.

Sir W. Jenner.

Liver, brain, and kidney disease.

So-called scrofula.

“ Syphilis is a preventible disease, the mortality from which is far greater than appears in the Registrar-General's returns. The frequency of cases of liver disease, of so-called consumption, of kidney disease, and of brain disease, which are referable directly to syphilis; and of cases of so-called scrofulous diseases in the child that are also due to inherited syphilis, becomes daily more apparent. Syphilis, more often than has commonly been believed, means death—death to the contractor of the disease, death to his offspring. \* \* \* If every young man curb'd his passions, syphilis might die out. Let teachers of morality and religion endeavour to impress on young men and lads, especially on the latter, the necessity for exercising this restraint. But until they have succeeded in their teaching, it is the duty of authority to prevent, as it could to a great extent, the spread of this terrible disease. The spread of knowledge and the influence of society can do almost nothing; moral teaching can do something; but law could do much to diminish the mortality from syphilis. It could prevent the prostitute from plying her trade in the public thoroughfares, and thus keep temptation to some extent out of the way of the merely irresolute and thoughtless; it is a disgrace to authority that it does not frame and put in force such a law. Again, law could check to a great extent the wide diffusion of syphilis. A little has been done in this direction, more is being attempted.”

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Law should check street solicitation.

*Letter from Mr. JAMES PAGET, F.R.S., Surgeon Extraordinary to HER MAJESTY THE QUEEN; Surgeon to H.R.H. THE PRINCE OF WALES; Senior Surgeon to ST. BARTHOLOMEW'S HOSPITAL.*

"It may be held as certain that legislation can greatly diminish the extent Mr. Paget. to which syphilis spreads by contagion; and the misery which syphilis produces calls for all that legislation can do to diminish it. For, however it may be argued that punishment falls justly on those who get pleasure or gain immorally, there can be no such argument when the victims of syphilis are innocent; and such victims are very numerous.

"The children of syphilitic parents are rarely healthy, especially among Inherited Syphilis. the poor. Many die in earliest infancy; many live a life of sickly misery for a few years, and then die; probably very few grow up to healthy manhood: partial or complete blindness, deafness, lameness from diseases of bones and joints, are common maladies among them, and seem to become more and more common as our knowledge of inherited syphilis increases. Blindness and deafness. Moreover, it is very highly probable that much of what is set down as scrofula is due to syphilis, modified in its transmission from parents to children: and certainly, from whatever source derived, the effects of all casual illnesses are enhanced, and their mortality is increased, when they attack those who have had syphilis.

"If charity towards those who thus suffer innocently be not enough to obtain help of law for the prevention of such misery, let it be considered how all society suffers through the spread of syphilis. On every day in every year it may be reckoned that many thousands are disabled from work by syphilis; and that the healthy are bearing the cost of their maintenance. Thousands disabled. Every year an untold number, far greater than is yet reckoned, die of syphilis at what, but for it, might have been their time of fullest power. Many more, after lives of sickness, die in early youth and childhood, before they can have repaid anything for the care and cost that they have needed. And many, who, but for syphilis, might have added to the strength, as well as to the number, of the population, die before birth.

"On the whole, I believe that, among the preventible diseases, there is not one which is the cause of so much misery and loss of life as syphilis is; and, since there is also, scarcely one among them of which the extension can be more certainly, in great measure, checked by law, the propriety of legislation for checking it seems clear.

"For illustration of the mischief that syphilis may do, I would adduce instances of medical men who have contracted the disease in performing their professional duties. I have seen at least five surgeons, in active Five surgeons died. practice, and in good health previous to inoculating this disease on their fingers, who have died; some after months, others after years, of illness. And I must have seen at least fifty who, through similar inoculation, have Fifty seriously ill. suffered more or less severely before they recovered health."

*December 17th, 1867.*

EVIDENCE given before the COMMITTEE on VENEREAL DISEASE in the ARMY and NAVY, by ARTHUR FARRE, M.D. *Physician Accoucheur to H.R.H. THE PRINCESS OF WALES; Late Professor of Midwifery in KING'S COLLEGE, LONDON.*

Dr. Farre:

Ans. 5830. "During the time—twenty-one years—I was physician at King's College Hospital, where there was a special department for children, the number of patients that passed through my hands was about 80,000, chiefly children, but many women. \* \* \* Among these children, examples of syphilis were so common, that I was nearly always able to give a lecture on half a dozen cases in a morning, on any of the three days of the week that I attended there."

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*Letter from ROBERT BARNES, M.D. Lond. Fellow of THE ROYAL COLLEGE OF PHYSICIANS; Ex-President of THE OBSTETRICAL SOCIETY OF LONDON; Obstetric Physician to ST. THOMAS'S HOSPITAL; Examiner in Midwifery at the ROYAL COLLEGE OF SURGEONS, &c.*

Dr. Barnes.

"It is impossible to estimate accurately the extent of the injury inflicted upon society by the insidious spread of the syphilitic poison. But every observant medical practitioner has abundant proofs that this injury is widespread and deplorable. In all classes, infants and children, virtuous women—especially mothers—suffer from this disease, or from some of its more remote consequences. Not only do innocent persons thus suffer individually, but society is deeply concerned by the degradation of health and the necessity for maintaining a large proportion of its members in infirmity—castaway, debased from the ranks of active and healthy humanity, scrofulous, insane, or idiotic.

Dead-born children.

"In my own experience I very frequently witness abortions, premature labour, and dead-born children from this cause, the mothers being deeply, sometimes irreparably injured in health. Other cases I frequently see are births of hydrocephalic, or strumous children, and of children bearing evident symptoms of the syphilitic poison. Many of these children succumb in infancy, others drag on a wretched existence.

Repeated loss of children.

"A most distressing circumstance in connection with these histories is the frequent recurrence of these evils in the same patient. Thus it is no uncommon thing for a woman to suffer five, six, even ten or more abortions and premature deliveries, and never to have a healthy child. The family distress and disappointments entailed are often grievous.

Midwives infected.

"In one instance, a midwife, herself pregnant at the time, contracted disease from a patient—she not only lost her child, but risked her own life, while seriously damaging her health.

"To me it seems a paramount duty to guard virtuous women and innocent children from the remote but certain and dire effects of the acts of others, which only can be done by secluding persons afflicted with contagious disease so long as they are liable to communicate it to others. Why should we direct preventive measures against cholera, and neglect the more destructive contagion of syphilis?"

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LETTER from SIR HENRY THOMPSON, *Surgeon Extraordinary to H.M. THE KING OF THE BELGIANS; Surgeon to UNIVERSITY COLLEGE HOSPITAL.*

"It would be difficult to make an exaggerated estimate of the manifold evils arising from the taint which syphilis communicates to humanity. Let it suffice here briefly to state that most individuals who contract this disease are more or less permanently injured; and their offspring are either tainted or enfeebled,—one example only of many modes, by which its pernicious influence damages the innocent.

Sir Henry Thompson.

"I know of one way only on which society can rely for checking the disease; it is not by hunting down the prostitute, and chasing her from one retreat to another—a treatment which increases her recklessness and propagates contagion—but, on the contrary, by caring for her health and by regulating her habits."

December 7th, 1867.

EXTRACT translated from *Parent Duchatelet's Prostitution de la ville de Paris.* Chapter XVI.

"Of all the contagious diseases which affect the human race, and which bring upon society the heaviest injury, not one is more severe, more dangerous, or more to be dreaded than syphilis. I fear no contradiction when I assert that the disasters syphilis involves exceed those of all plagues which from time to time have been the terrors of society. Thousands of pounds have been spent every year for more than a century to check the Plague, which, though constantly in action at Constantinople, has not yet depopulated that city. The same effort has also been made against yellow fever in the cities of America; but nothing has been done to stay the progress of the gravest and most frightful of all plagues, one which has been with us for at least three centuries. Syphilis is among us and among our neighbours everywhere. It does not kill at once, it is true, like many other diseases, but that does not render the number of its victims the less immense. Its devastation is unceasing, against that part of the community of an age to be the wealth and strength of the State. Syphilis enfeebles the population, both in earliest infancy and at the time when nature calls for the multiplication of the species. Through syphilis the offspring is puny, or those who should be parents are sterile. Again, the purest virtue and highest innocence are subject to its curse. How many foster nurses, virtuous wives, and infants at the breast, succumb yearly to the ravages of syphilis!"

Most deadly of all plagues.

Syphilis attacks young and growing.

Innocent persons.



No. II.  
PREVENTION.

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GOOD EFFECT OF THE PREVENTIVE MEASURES ENFORCED  
AT CORFU, MALTA, AND TAHITI.

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EXTRACTS *from the Report of the Committee on Venereal Disease in the Army and Navy.*

“ *Lieut.-Gen. Sir Henry Storks, K.C.B., to Mr. Skey, Chairman of the Committee.*

“ *Palace, Malta, October 22, 1865.*

Sir Henry Storks. “ Sir,—I have the honor to acknowledge the receipt of your letter of the 6th instant requesting me to communicate to the Committee, now sitting at the Admiralty for the purpose of investigating the subject of venereal disease, some of the results of my experience on this important question.

\* \* \* \* \*

“ I proceed to indicate the places where I have seen the venereal disease checked and controlled, and to state the means by which this great result has been achieved.

Corfu. “ When I held the office of Her Majesty's Lord High Commissioner of the Ionian Islands I gave a good deal of attention to this subject, and I found that the disease prevailed in all the larger islands, and that the troops suffered a good deal from it.

“ It was determined to apply with care and vigour the powers given by the law as regarded registration and inspection of prostitutes, and all the women of the town were registered by the police and periodically inspected by the police physician.

“ This careful and periodical inspection was attended with the happiest results, and the disease may be said to have almost disappeared in the Islands of Corfu, Zante, and Cephalonia.

Malta. “ In Malta, the same police regulations exist, and I know of no place so singularly free from venereal disease as regards the professional prostitutes.

“ To give an example of the actual state of Malta as compared with stations where the women of the town are not inspected, I would refer to the condition of the garrison with reference to the venereal disease during last spring and summer.

“ On the 12th of April the 84th Regiment disembarked at Malta. On that day, the cases under treatment in the hospitals, including the whole garrison of this fortress amounting to 6,192 men, were 5.

“ The 84th Regiment reported 19 cases on arrival, and a week after their disembarkation there were 38 cases in the regimental hospital, the increase arising from undetected cases during the voyage.

“ The 29th Regiment disembarked on the 1st of July, and reported 16 cases of venereal. The day previous there were only 23 men under treatment for this disease in the garrison, and the majority of these cases were in the 84th Regiment.

“ After the 29th Regiment had been a week in the command, 23 cases were under treatment in the regimental hospital.

" Both regiments came from Dublin to Malta. Yesterday, the 21st October, there were 8 cases of venereal disease reported in the garrison. This statement will, I think, sufficiently prove the superior sanitary condition of a place as regards the venereal disease where the women of the town are registered and inspected.

" The amount of disease and misery that would be prevented by enforcing a sanitary inspection of prostitutes is incalculable, and it is a subject which earnestly claims the attention of the authorities competent to deal with it.

" I have, &c.

" (Signed) H. K. STORKS."

[*Mr. Inglott, Comptroller of Charitable Institutions at Malta to Mr. Skey.*  
*Office of Charitable Institutions,*  
*Malta, November 6, 1865,*

Sir,

" Females leading a life of prostitution were, from the time of the Knights Mr. Inglott. I believe, subjected to certain police regulations and to 'periodical personal inspection;' but in the beginning of 1859 it was found that the 'personal inspection' was not ordained by law, but was a traditional abuse of power which may be put at defiance by the slightest resistance. The fact was artfully communicated to the peculiar class of persons concerned, and a general resistance was soon made to the practice.

" The awful consequences of non-restraint soon became apparent, more especially in the wards of the military and naval hospitals, and the Local Government was moved to enact the enclosed Ordinance, with the view of preventing the spreading of the disease.

" From its few and brief enactments the 'details of our management' can be very easily inferred.

" The operation of this law has had the effect of checking public prostitution to a great extent, besides of almost annihilating the disease.

" The Malta law, you will observe, does not involve 'a system of legal recognition of public prostitution,' it does not 'license females to the unlawful occupation,' but simply places those who practice it under a kind of surveillance, with a view of obtaining a sanitary advantage by enforcing a measure which tends to mitigate or prevent the awful consequences of neglected syphilitic affections. Besides 'periodical personal inspection,' the Malta law also enjoins the establishment of 'Lock Hospitals' without which the good results I have described would not have been obtained.

" Syphilitic affections, being thus timely discovered and forcibly placed under medical treatment, are generally primitive in their character, and consequently easily overcome. Cases of consecutive syphilis are comparatively rare, and none present those horrid forms so common where the disease is under no surveillance.

" Seasons have come during which the wards of the 'Lock Hospital' contained but one or two cases, and were it not for the inoculation from imported affections by foreigners and others, the disease would have long been extinct.

" J. V. INGLOTT."

*Evidence of Admiral Sir W. Fanshawe Martin, K.C.B.*

Sir W. F. Martin. Q. 6981. "You were in the neighbourhood of Malta on the occasion of the important experiments that were made. \* \* \* \*

Is your experience of the results of the surveillance that was put in force decidedly favourable?—Decidedly; it was in consequence of letters which I wrote from Malta to the Admiralty, that that system was put in force in Malta. It had been in abeyance for several years, and the consequence was, that from forty to fifty beds were ordinarily occupied in the Malta Hospital by patients who had contracted the venereal disease on the island. After the regulations with reference to the police, and the Lock Hospital had been in force for a few months, there was not a single patient, I believe, in the Malta Hospital, who had contracted the disease on the island.

Half the invaliding in the Navy due to Venereal disease.

6982. "All the cases that were in the hospital were brought by ships from different ports?—Yes; at that time. It has been estimated that half the disease in the Navy of so serious a kind as to lead to the discharge of the sufferers from the service, has been occasioned or aggravated by that one complaint; and but for which, each of our naval hospital establishments might be considerably reduced. In other ways, the public pay enormous sums of money in consequence of its effects upon soldiers and sailors. Sending to England from remote stations, the men who have in reality broken down from the fruits of venereal, whatever eventually they may have been invalided for, and replacing them by men from England with the latent seeds of secondary symptoms, besides being an ever recurring cause of expense, is a serious inconvenience to the services."

*Evidence of W. H. Sloggett, Esq., Staff Surgeon, R.N.*

Mr. Sloggett.

Q. 1515. "Can you give any evidence to the Committee as to the influence of preventive measures which have been adopted at home or abroad?—Yes, I can. In the year 1858 I was surgeon of the "Calypso," a small frigate on the Pacific station. We were at Honolulu, in the Sandwich Islands, with 153 men, from November until February; we were there for three months, and during that time the men were constantly on shore, in fact the ship was at anchor only about 30 yards from the shore. The men had unlimited leave at Honolulu, where at that time no sanitary regulations existed, but since then they have been adopted. After leaving Honolulu, we had 19 cases of venereal ulcers put on the sick list, and 14 cases of gonorrhea, making a total of 33 cases; the strength of the ship was 153 men. In 1860, with the same ship's company, all of them the same men, we went to Tahiti, an island which was under French protection, where the ship remained three months. She was hove down, and the men during that time lived in huts on shore, and, of course, intercourse with the natives was unrestricted. After leaving Tahiti, we had a long sea voyage of ten weeks before we arrived at Valparaiso. I had but four cases put on the sick list, only one of which was of venereal ulcer, the other three were gonorrhea."

Sandwich Islands.

Tahiti.

Q. 1516. "What inference do you draw from that fact?—This: in Honolulu there was at that time no sanitary inspection, and no police



regulations; but at Tahiti, since the French have occupied the island, they have instituted a rigorous system of police. The French had a garrison there of 300 French troops, and 150 Zouaves, who were native troops—South Sea Islanders. I used constantly to visit the Military Medical Hospital at Tahiti during the whole of my stay there, and there were but two men in that hospital with primary syphilitic disease, French or native. There may have been one or two with gonorrhea, but I forget."

Q. 1517. "To what do you attribute that paucity of cases?—To the system of registration that was adopted by the French. But I can give the Committee some other details which I think may be interesting. During my stay in the Sandwich Islands, I was in the habit of visiting the native villages, and seeing the interior of the native huts, and I was then painfully struck, not only with the fewness of the children, but also with their generally diseased appearance. The traces of constitutional syphilis were plainly marked in a very large number of them. At Tahiti I was personally on very friendly terms with the superintending French physician, and I made with him visits of inspection to several of the native villages. The French at that time had adopted a system of compulsory vaccination [against smallpox], and every child was compelled to be vaccinated. During my stay there, the French physician made three visits to vaccinate the children, and on each of those occasions there were from 30 to 40 as healthy-looking children as I would wish to see in any English village—plump, healthy looking children, and the contrast to me was most striking. I may add further, that among the older natives it was not at all infrequent to meet with people who had lost the nasal bones—who had cicatrices over the forehead, and who bore the marks of syphilitic disease to a fearful extent. Among the younger people it had entirely disappeared."

Population  
decimated at  
Honolulu.

After Preventive  
measures enacted  
at Tahiti healthy  
children born.

No. III.

## THE WORKING OF THE CONTAGIOUS DISEASES ACT.

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*An Abstract of papers published in the British Medical Journal of  
December 28th, 1867, January 11th, and February 1st, 1868.*

By MR. BERKELEY HILL, M.B. Lond., F.R.C.S.

*Surgeon to Out Patients at the Lock Hospital; Assistant Surgeon to University College  
Hospital, etc.*

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### I.—CHATHAM AND PORTSMOUTH.

Mr. Berkeley  
Hill.

As one of the Honorary Secretaries to this "Association," Mr. Berkeley Hill has collected information on the spread of venereal diseases, and on what becomes of prostitutes when suffering from the ravages of these disorders. In doing this he has, with the aid of the metropolitan police, visited in their company the quarters where the prostitutes live, conversed with these persons on their mode of life, and learned how they get treatment for venereal disease when it is contracted. In order to compare the condition of the women in London with that of prostitutes in towns where the Contagious Diseases Act is in force, he has also visited several of these districts, where he has prosecuted similar inquiries.

Reasons for  
limited success.

His narrative shews that Government has employed the powers conferred on them by Parliament to a very limited extent, and that the success has been just in proportion to the exactness in which the provisions of the Act have been enforced. Venereal disease is already checked in the garrisons, though to an extent much short of that expected of it. The reasons of this partial failure are explained by the visits to Chatham, Portsmouth, Devonport, and Aldershot.

No. of Women  
under  
surveillance.

At Chatham about 200 women are under surveillance. This number includes only notorious prostitutes. There are, besides, many factory-workers, servant girls, and married women, practising prostitution clandestinely, who are not included in the occasional inspection of the visiting surgeon. At Portsmouth about 560 women are under surveillance. Here, also, this estimate is not supposed to include all the women carrying on prostitution, though there is good reason to believe that the number of those escaping observation is now rapidly diminishing.

Imperfect  
examination.

The women who are under surveillance are subjected to examination only when the police have reason to suppose them diseased. If diseased, they are detained in hospital until the surgeon can certify them to be free from active local disorder. Facilities are also afforded them for entering a penitentiary when they leave the hospital. This imperfect mode of carrying out the Act is very greatly the cause of its ill success. Women are not summoned till suspected of being actually diseased—that is, until they have infected some one else, and thereby directed attention to

their own health. It is true, that, as the women grow accustomed to the benefit of the Act, more and more of them come voluntarily for examination and admission when they believe themselves infected. Mr. Hill.

The hospital was acknowledged to be a very good thing by all the women, one of whom declared she would always come back to Chatham if she ever became ill elsewhere, for the sake of getting into it. Few could compare the state of affairs previous to the operation of the Act, with that at the present time; but those who could, were very decided in preferring the actual condition to what it had been before. The hospital highly appreciated by the women.

The police were unanimous, both at Chatham and Portsmouth, in holding the regular examination of all these women indispensable. This view was confirmed over and over again by the women themselves, who find their sufferings much lessened by early treatment of a malady of which they are, through ignorance and inobservance, often unconscious for some time after its outbreak. The women most strenuously object to irregular, and, as appears to them, often capricious selection of individuals. To single a woman out for examination is to render her at once an object of reproach to her companions. On questioning many women, Mr. Hill found some disliked the examination on account of the trouble; one, but only one, complained of the exposure. In this respect they appear to take a very sensible view of this disagreeable necessity. Though some were content with the present arrangement, the great majority declared that regular examination of every woman would be the best for all parties. Regular examination indispensable. Women ready for it.

Mr. James Lane, one of the surgeons in charge of female patients at the London Lock Hospital, in his first report on the Government patients, very strongly insists on the necessity for regular and frequent examination. He says:—"The milder forms of disease, which are prolific sources of disorder in men, excited in the women themselves so little inconvenience, that they are constantly overlooked." Thus the absence of regular and of frequent examination allows the disease to be communicated to others before it is discovered; while the very persons most interested acknowledge the advantage of a strict examination of all. Irregular examination often induces the women to evade inspection, or conceal their disease. Experience shews also that many of these women suffer so much from the unrestricted intercourse they allow, that they are continually falling into a condition sufficient to excite disease in the male. Much disease is overlooked.

Again, the number of beds appropriated to the reception of the women is very far too small. In consequence of this scanty accommodation, women known to be diseased often wait some days before they can be received. To relieve this pressure, the medical officers in charge of the hospitals often cannot avoid discharging patients before their disease has fully lost its contagious quality, in order to make room for others known to be in a worse condition. The average period of stay in hospitals is thirty-one days in Portsmouth, in Chatham thirty-two days, and in the London Lock Hospital thirty-four days. Too few beds.

At Portsmouth, the sixty beds now used for female patients will soon be increased to a hundred and twenty, a number probably sufficient for the prostitute population of that district. In Chatham, the Government has forty beds; and eighty beds in London for patients from Chatham, Woolwich, and Sheerness.

Mr. Hill.  
Limited area  
of the Act.

Constant influx of  
diseased women.

Changes among  
the garrison  
bring fresh  
disease.

Effect on the  
Royal Engineers.

Effect on the  
Marines.

The very limited area over which the preventive measures are enforced is perhaps the main cause of failure in checking venereal disease. Women come and go between Chatham and Gravesend, not far distant, but beyond the limits, and often walk in from Canterbury, Maidstone, and other neighbouring places, solely because, being diseased and turned out of their lodging, they come where they know there is a means of cure. On the morning of Mr. Hill's visit there, out of four women who were found diseased three were recent arrivals in Chatham. Mr. Parson, the visiting surgeon for Portsmouth, told him that, shortly before his visit, two women severely diseased had walked thither from Southampton, distant eighteen miles, solely to get into hospital. Usually, however, these women do not seek relief till suffering severely; nor do they refrain from prostitution if they cannot immediately procure entry into hospital.

Not only does the immigration of diseased women nullify the operation of the Act; but the soldiers and sailors themselves bring much disease from unprotected districts, in their own persons and in those of the women who follow them. Between Gravesend and Chatham, men are constantly going to and fro. At Gravesend, during several months of the year, as many as as five hundred men are often quartered for target practice. The men forming this force are constantly changing as they complete their period of instruction. This evil is still more clearly shewn in my account of Devonport.

Dr. Cockburn, of the Royal Engineers, has drawn a diagrammatic chart of the fluctuation in the admissions for venereal disease per 1000 of strength during the last five years, in that body of men. From this chart, it appears that in this corps, one of the best educated and best conducted in the service, the average in 1863 and 1864 was 29·6 and 27·75. In 1865 and 1866, the date when the Act came into operation, it fell to 20 and 18·6. But this result, apparently so satisfactory, is shewn to be fallacious by the returns for the present year, in eleven months of which they have averaged 29. Probably, the fall in 1865-66 was partly due to the influence of the Act, but also partly to other causes which we cannot appreciate. On the other hand, some of the increase can be fairly charged to the small area protected.

The sappers at Chatham, unlike other soldiers, change in small numbers—seldom more than fifty at a time—and only at long intervals. But on the other hand, they are more highly paid than others, and are frequently allowed to run up to London or elsewhere. Hence they are not so much limited to a single locality, as the soldiers of other corps. This, again, is a reason for extending the area over which the Act operates, so that the men should not outstep its protecting influence. Dr. Cockburn finds that, among the Engineers, the admissions for venereal disease rise rapidly after the corps has enjoyed a holiday—either the ordinary holiday of Easter, &c., or those given on completion of the annual drill, and other occasions. At these times, a larger number of women flock from the neighbourhood into Chatham than at other seasons.

Dr. Anderson, Deputy Inspector-General of Melville Hospital, has also been at much pains to supply me with information respecting the influence of the Act on the Marines at Chatham. Their strength varies but slightly, lying usually between 1500 and 1600 men, who, like the Engineers, do not frequently change their quarters. He speaks most strongly of the influence



of the Act in alleviating the severity of the disease, and in diminishing the number of men attacked. This is borne out by comparing the entries for the third quarter of 1864 with those of the corresponding quarter of 1867, which were—

1864. Syphilis . . . . .	95 cases.	1867. Syphilis . . . . .	45 cases.
Gonorrhœa . . . . .	21 „	Gonorrhœa . . . . .	33 „
Total . . . . .		Total . . . . .	
116		78	

Mr. Hill next refers to the social condition of the women. Chatham, Rochester, and Strood, contain a population of about 100,000, consisting, besides the soldiers, sailors, dockyard officials and workpeople, of tradespeople, and factory-workers. There is no fixed class of gentry to give a tone, and set an example, to society. The morals of the lower classes are extremely low; but, though still a crying disgrace in this respect, public decency has been greatly improved since the Act has been enforced. The frightful abandonment to all kinds of foul debauchery is now lessened. The lowest haunts of vice are regularly visited by the police; and thus the worst excesses are prevented. The material condition and the moral feeling of the women are greatly raised. The police, in their communications with the women necessary for carrying the Act into effect, have become in a certain sense, their friends and protectors from the tyranny and brutality of the low beershop-keepers, who, as a class, are most loathsome. To these girls, the police inspector is often able to give a word of advice, and to persuade them to communicate with their friends.

Morality improved.

Act promotes reform.

These women are a peculiar class, differing much from the low prostitutes of London. They have nearly all been servants (maids of all work), and are mostly from sixteen to twenty years old. They generally rent a room in lodging houses situate in slums behind the beershops, and which commonly belong to the beersellers, at a cost of one or two shillings a week. These beershops abound in the High Street of Chatham; in Portsmouth they are mostly in the back lanes, in alleys, behind larger houses, and are simply brothels of a villanous character. The mode of life of these creatures is fearful. The majority are encouraged by the keepers of wretched little beershops to frequent a back room that is generally ill lighted, dirty, and without decoration of any kind, the only comfort being a good large fire. Here they sit in an evening to entice the soldiers, who come in and dance, drink, and sing with them. The girls drink much, and, on the whole, get plenty to eat; but they squander their gains with the particular soldier of their fancy.

Prostitutes' mode of life.

There is yet the lowest class of prostitutes—whose attractions are past. These are not allowed to stay in the beershops at night, but lurk about the neighbourhood of the barracks, under Fort Pitt, or near Melville Hospital, in “the Orchards,” a grove of trees where the grossest indecency is practised openly. These creatures prostitute themselves for a glass of gin, a few pence, or even some of the soldiers’ bread. Such an one Mr. Hill found on going into a dark room behind the front shop of a public house. In it he could just distinguish a wretched old woman, whom the landlady had allowed to come in for a warm during the slack time of the day, and had also given her some soup and a piece of bread, the only food the poor creature had eaten

Abject state of some women.

Mr. Hill.

for two days. She told him that, five years ago, her husband, a shopkeeper, failed. She took to drink, and hawked combs and hairpins about for a living. She soon fell into prostitution. She had been three times in hospital—once seven weeks, once three months, and once ten days. She had two grown-up sons, and a daughter married; they were away, she did not know where, but, she believed, prosperous. They had become tired of her, and cast her off; and she would gladly do anything that would give her a warm bed, some victuals, and some clothes. The inspector told Mr. Hill this woman was thoroughly idle, and would steal readily enough, if occasion offered. Attempts had been made to reclaim her before, but she soon returned to her old habits.

Low beershops.

Near the "Orchards," Mr. Hill was shown a most disgraceful arrangement, in the back premises of a beershop, where the late owner had constructed a number of little one-roomed huts which he let out to the girls at 2s. or 2s. 6d. a week, but required them to pass their evening in the tap below, and encourage soldiers and others to drink and spend their money.

Sacrifice of children.

Nearly all the women prefer their life, to the hardships of honest labour. When diseased they go to the hospital or workhouse. When about to lie in—and most of them bear children, some of them several times—they go to the workhouse, whence they bring their children, to put them out to nurse, during the short life that all but very few of these little creatures enjoy. One woman, who had been a prostitute five years, said that she had had three children, which, as soon as born, had been put out to nurse close by, but were all dead. Mr. Hill could not gather any other objections, held by the women themselves, to the Act, though he had many opportunities of talking with them. He found, also, that most women do not allow the disease to reach to such an intensity as heretofore. The inspector stated that some of them, especially those who have been ill before, will apply at once for treatment, if infected. Their habits, he said, with the exception of such as have separate rooms, are not cleanly.

Clandestine prostitution hindered.

Clandestine prostitution is practised to a considerable extent, but, so far as regards the influence of this Act, it is checked rather than increased. The checks are two. Many young girls, who have not yet become acknowledged prostitutes, are prevented to some extent by the fear of being taken to the surgeon for examination. The inspector is often able to give these girls' friends a word of caution, and also to negotiate, if the girls are sent to hospital, their return to their homes when they come out. There are many women married to soldiers and sailors who, in their husbands' absence, lead immoral lives. The Act has an excellent effect on these, by rendering them liable to examination; they dread the notoriety which follows their being sent to hospital; the news is sure to reach their husbands' ears, and their allotment of pay ceases.

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## II.—DEVONPORT AND PLYMOUTH.

Success of Act impeded by its limited operation.

The causes which frustrate the Act at Portsmouth are also at work at Devonport and Plymouth, though the surgeons and the police have exercised great skill in availing themselves to the utmost of the means at their

command. Their efforts are very much aided by the naval and military Mr. Hill. officials at Plymouth, who are well aware of the benefit that attends the fulfilment of preventive measures. For these reasons solely, the success of the act is more marked at Plymouth than at Chatham or Portsmouth.

The Government set the Act of 1864 in operation at Devonport in April, 1865. This Act was continued to September, 1866, when the present one came into force. The Government arranged with the authorities of the Royal Albert Hospital, Devonport, to rent a number of beds, which has gradually increased from thirty-eight beds at the beginning, to eighty-six at the present time; a number that, before the end of the first quarter of 1868, will reach 142. This accommodation will probably, after a time, be more than sufficient for the district; though, till the amount of present disease in the towns of Devonport, Plymouth, and Stonehouse is greatly diminished, the beds will not contain all the diseased women. There are about 1100 prostitutes in this district under police surveillance, and probably between 300 and 400 more, over whom the police exercise very little supervision, either because they manage to escape notice, or because they do not associate with the soldiers or sailors. The hospital accommodation for the 1100 women has never been even nearly sufficient. In order to economise it as much as possible, the police hardly ever summon women for examination on information received from a single soldier or sailor. They always select women against whom they possess several accusations, and also those from whom the men have contracted venereal ulcers or syphilis, the severer kinds of disease. Hence it can readily be conceived that numbers of diseased women escape examination altogether. The following shows how accurate their information is. In eighteen months of the first Act, 452 women were examined; of these 6 only were found by the surgeons free from disease. In the 15 months of the Act of 1866, 451 women have been examined; of these 31 were found free of disease, or 37 out of 903. This condition of the women continues unabated, for I learn from Mr. Sloggett, the visiting surgeon, that on January 1st, 24 additional beds were placed at the disposal of the surgeons. To meet this sudden increase the police selected 34 women for examination, of whom only 5 were found free of disease. The pressure on the beds, is relieved by the police in two other ways. By one they avoid the difficulty which has arisen at Portsmouth and Chatham, and which also began to be felt at Plymouth 18 months ago, namely, the influx of diseased women from the neighbourhood. The Plymouth police get rid of such persons at once by sending them to the workhouse, when they are passed on to their own parish. The second mode is to limit their surveillance to the women associating with the soldiers and sailors; if other women are diseased, they are not allowed to come into the brothels where the soldiers resort. The police interpret the Act solely for the benefit of the soldiers, and not for that of the town generally. Probably they are by these means, to some extent, successful in shielding the garrison from venereal contagion; though, of course, sending such women back to their parishes, is importing venereal disease into other localities, and the community at large benefit little by the procedure.

There is another source which spreads much disease among the women. By a clause in the Merchant Shipping Act, masters of trading ships are not compelled to support their sick seamen if the illness be venereal. Thus

Application of the Act.

Number of prostitutes.

Hospital accommodation never sufficient.

Large number of diseased women.

Influx of diseased Women.

Disease among destitute merchant seamen.

Mr. Hill.

these men, when useless aboard ship, are sent ashore to shift for themselves. In this condition, and often quite destitute, the men seek admission to the Royal Albert Hospital, which does not receive such cases; hence, being strangers, and without other resource, they take refuge in the low brothels, fasten themselves on some woman, whose gains help to provide a livelihood for both, until the man is ultimately sent to the workhouse. The women, it can be imagined, quickly communicate fresh disease to the soldiers and sailors—their usual clients. Even, if solely to prevent the disabling of soldiers, it would be good policy to establish a hospital for the merchant seamen at this and other ports where there is no accommodation now.

Disease  
constantly  
increases after  
the arrival of  
fresh troops.

Another point is extremely instructive and worthy the consideration of those military medical men who oppose personal examination of soldiers. Troops arriving from other stations are constantly bringing fresh disease into Plymouth. One day last summer the inspector, on visiting the military hospital, found 13 men in the wards with venereal disease from a regiment recently arrived at Plymouth; 12 belonged to the dépôt sent from Chatham, 1 only to the main detachment of the regiment just home from foreign service. The men of the dépôt had brought their disease with them. The inspector then bethought him of looking up the women in the brothels frequented by this regiment. He soon discovered that a large number of the women had suddenly become diseased, and very shortly informations against them came in with great rapidity. I have before me a return of the entry of troops into Plymouth garrison since January 1865 to November 1867, and also a chart of the fluctuations in the number of diseased soldiers per 1000 of the garrison since April 1865 to December, 1867. In April 1865 the number of diseased men stood at 18; in May and June a regiment arrived, its dépôt from Colchester, and the main body from India. In this month the numbers rose steadily to 34, again falling to 23 in July, when no troops entered. On August 4th, five companies of infantry arrived from Aldershot, and the number reached 34 a second time; thence a steady fall set in through September and October, down to 12 in November, in which interval one troop of the military train was the only increase to the garrison. On 21st December a detachment arrived from foreign service, the remainder of the regiment, its dépôt, coming from Chatham, joined it in January 1866. Through February and March the entries rose to 27; through April, May, June and July the line sank to 20, though three batteries of artillery came in from Bristol and Pembroke, besides one regiment from Aldershot and one from India. In August no troops, and the wave line fell to 12. On 1st September a regiment came from Aldershot, the wave rose at once to 21. After that time the line subsided to 13 in October, and kept hovering between 11 and 12 during the winter, until March 1867. No fresh troops entered garrison after the 1st September till the 23rd February, when a dépôt came from Dover. In March there was a slight rise. In April and May troops came from India, Portsmouth and Pembroke; the line rose rapidly through May to 22 in June. In June no troops arrived, and the mark for July dropped two points. On 26th July a dépôt came from Chatham, and other companies of the regiment in August, when the wave mounted to its highest point since the operation of the Act, namely, 35 per 1000. This new arrival was the regiment which produced the havoc among the women already narrated. Since September

Exception.



no troops entered garrison at Plymouth till the 11th November, and the line has continued falling to 22, its present level. Mr. Hill.

The regiment which entered on the 11th would probably have created a disturbance similar to that of August and September, had not the authorities directed that the men should be examined before they were allowed to leave barracks. This was done, and nine men were found diseased and sent to hospital before they were able to communicate with the town. This salutary provision is, to be henceforth carried out with all troops entering Plymouth garrison. Soldiers are stated to return to garrison after a few days' leave with disease caught elsewhere. The rise and fall in the wave line of the soldiers' disease are accompanied by similar rise and fall in the number of women detained each month with disease. The fact that disease is so readily carried from place to place is a great argument for extending the operations of the Act to all large towns and military stations. Increase of sick soldiers accompanied by increase of sick women.

In estimating the benefit already gained from the Act, a much more satisfactory balance can be struck for Plymouth than either for Chatham or Portsmouth, though the consequences of the defective working of the Act are of a similar kind at all the stations. The late Dr. Beith, Deputy-Inspector General of the Royal Naval Hospital, Plymouth, furnished the following comparison of the entries of sailors into the hospital, whither only the severe cases of venereal disease are sent. Slight cases are treated aboard ship. Proportion per cent. of admissions for venereal disease to the whole surgical entries at the Royal Naval Hospital. 1861, 65·70; 1862, 59·83; 1863, 60·29; 1864, 62·70, or three years before the Act. 1865, 62·67; 1866, 49·33; 1867, 39·69, or after three years of the Act. The entries for venereal ulcers at the Royal Marine Infirmary were for the quarter ending June 1865, 105; September 1865, 82; December 1865, 66; March 1866, 42; June 1866, 60; September 1866, 64; December 1866, 47; March 1867, 37; June 1867, 40; September 1867, 51. Amount of disease falls steadily.

Mr. Sloggett, R.N., Visiting Surgeon under the Act, states that the disease is assuming a milder form. The women have become much more cleanly in their habits, and their general health is greatly improved. A few years ago, it was no uncommon thing for the women to die in a state of complete neglect. This, of course, never happens now, as the police send persons dangerously ill at once to the workhouse, where they can be duly cared for. One most important improvement has taken place. The women no longer solicit passers in the streets; and public decency is not outraged in Plymouth as in many parts of London and other towns. Disease gets milder.  
Solicitation in the streets abolished.

The success in rescuing young girls from their vicious life is very considerable. From several instances of this kind the following is an example. A servant-girl had left her place a few weeks before to follow a soldier. The father being dead, the inspector wrote to her mother and brother, who are small farmers in Cornwall. They readily received the girl back to her home, where she is now leading a steady, virtuous life. Experience shews, nevertheless, that the best chance for a girl's reclamation is to send her to a refuge, and not at once to her relations, who are seldom at first sufficiently careful or forgiving to prevent her from going again astray. The hospital authorities have made great exertions to reclaim the girls; and Act potential for reform.

Mr. Hill.

Thirty-eight per cent. returned to friends.

have returned to their friends no less than thirty-eight per cent. of the patients after their discharge from hospital. Though several of these girls relapse into vicious habits, a very encouraging proportion remain in honest industry. Frequent re-admissions are common. In two years and a half, 775 women have been in the hospital; of these, 190 were sent in a second time, 75 a third time, and one even a seventh time.

Acquiescence in the working of the Act.

Mr. Hill found the social condition of the women at Devonport and Plymouth very similar to that existing in Chatham and Portsmouth, and that these persons are even more unanimous than the prostitutes of Portsmouth in acknowledging the benefit they derive from the Act, and their readiness to submit to periodical examination.

Mortality of the children.

The consequences of venereal disease among the population, are very serious indeed in the Plymouth District; in the three towns of Plymouth, Stonehouse, and Devonport, 150 children die annually of those born of prostitutes, one third being still-born; of the remainder, a large proportion die also shortly after birth or in early infancy. This large mortality of infant life has at length attracted the notice of the townspeople; and a small hospital has been established at Devonport for the children of soldiers and sailors, of which Mr. J. W. Batten is the treasurer.

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### III.—ALDERSHOT, WINCHESTER, AND WINDSOR.

THE Contagious Diseases Act is enforced only in the first of these three places; but the others, particularly Winchester, are in frequent communication with Aldershot; they are grouped together that the necessity for extending the Act to localities where no preventive measures are enforced may be placed in stronger relief.

Destitution of Aldershot women less.

*Aldershot.*—Previously to the Act being put in operation here, the condition of the women equalled in wretchedness that of the “Wrens of the Curragh,” so vividly described in the *Pall Mall Gazette* last October. Last spring, scores of women lay out under the hedges and in ditches around Aldershot, in a frightfully diseased condition; their only other refuge being the celebrated Farnham Union. They lived on the small sums they got from the soldiers, who associated with them notwithstanding their foul and dangerous state. The state of the women has been greatly improved since the Act has been in force, but even so late as last August, a girl was found by the police living in a drain for three weeks; being carried thither by her companions and abandoned when dead drunk and penniless. When found by the police, she was literally swarming with vermin, to hide which she kept her thin gown drawn tightly over her head. At the time of my visit to Aldershot, she was still in hospital, and looked a quiet decent girl enough. The following instance is an example of the manner in which numbers fall into depravity and misery, to a great degree through want of good guidance. On the day of my visit, the surgeon had admitted a young lady-like girl, whose brother was a tradesman. She had eloped from school only a few weeks before to follow a dragoon. This man brought the girl to Aldershot, and presently deserted her. The police found her in a brothel, whence they removed her, as, having communicated

disease to others, it was necessary she should be admitted into the hospital. Mr. Hill. It was gratifying to learn that the surgeon expected to be able to restore her to her friends, when she had recovered her health.

In April 1867, the Act was set in operation at Aldershot for the first time; and women were sent to the Lock Hospital in London, where twenty beds were engaged for them, until the hospital at Aldershot was established at the end of June. This is the first hospital which Government has taken under its control; elsewhere the course has been to rent beds, or to aid in the enlargement of civil hospitals to receive the women. At Aldershot, no opportunity for making this arrangement exists, so a long galvanised iron hut, lined with wood, having windows on each side, has been converted into a hospital, which duty it performs very well. The War-Office has wisely erected the hospital in the neighbourhood of the women's abodes, instead of sending them all to Portsmouth or London for hospital care. The number of beds, at Aldershot was at first thirty, increased by twenty in August. These make with those in London, seventy beds for the reception of the camp women. Seventy beds have, nevertheless, never been sufficient to contain all the diseased women, of whom there are always some waiting for admission. It is much to be regretted that the means at the disposal of the War-Office should not afford a sufficient supply of beds to receive all the women as fast as they become infected. At Sheerness, the single station where this has been possible, the result of the operation of the Act has been far more successful than elsewhere.

The number of women at Aldershot who come within the definition of common prostitutes is 245; but there are more who practise prostitution too secretly for the police to venture to include them in the above list. The number of women, again, varies with the number of troops in camp; at present, it is much below the summer average.

The compliance of the women with the regulation of the Act has hitherto been voluntary; compulsion has not in any case been resorted to, to bring them to examination, because women are always at hand ready to fill the beds as fast as they can be emptied.

The inmates are generally quiet and docile, being kept employed in washing and sewing and similar occupations. Only four have been punished for insubordination since the hospital was opened. The average stay during the six months has been very similar to that elsewhere, viz. 36 days, taking all cases together.

The influence of treatment over the severity of the disease is apparent here, as at Plymouth and Portsmouth. The number of women admitted per month for simple affections is increasing, while that for ulcers is diminishing; and the ulcers are less severe in form and extent than those of the women admitted last summer.

It can readily be conceived, that Aldershot, so accessible to Winchester, Portsmouth, and London, is constantly receiving fresh importations of disease in the persons of the men and women arriving there. To shew to what an extent the soldiers are concerned in this, I learn that, during the month of December, about 70 cases of venereal disease were admitted into the military hospitals of Aldershot; in 38 of them, disease was contracted away from camp by men on furlough or detached duty. Infected women, on the other hand, are constantly coming

Lock Hospital  
at Aldershot.

245 Women under  
surveillance.

Patients orderly  
and well  
employed.

The disease  
grows milder.

Constant fresh  
importation of  
disease.

Mr. Hill. into camp, either following a regiment when changing its quarters, or obliged to quit their previous abode in consequence of being diseased, and hoping at Aldershot to pursue their occupation in a locality where they are unknown. The police find by experience that most new comers are diseased before they arrive.

Benefit of Act beginning. Though the time is yet too short (nine months), and the Act has been applied far too imperfectly for any diminution in the amount of venereal disease in the troops to be laid indisputably to its credit, yet the large proportion of the venereal cases during December which were contracted beyond the limits of the district, and a steady decline in the percentage of venereal disease among the troops in camp this winter, are certainly indications that a favourable change is beginning. What most markedly shews the value of the Act, is the improvement in the condition of the unfortunate women themselves. The officials engaged in working the Act have already rescued several women rescued. many who would otherwise have continued their former pursuits, while they have been saved much bodily suffering and prevented from communicating it to others.

WINCHESTER. *Winchester.*—This is a town of 14,500 inhabitants. In addition to these, an average of 1,100 troops are in garrison there. The men composing the garrison are often changed; hence the number passing through Winchester, consisting to a great extent of recruits and young subaltern officers, is really much more than 1,100 men. These frequent changes excite corresponding roving among the women, who go and come between Aldershot, Southampton, Portsmouth, and Winchester. The prostitutes of Winchester are, almost without exception, of an extremely low class, lodging in beerhouses situate in alleys and corners out of sight. One of the most notorious of these places, nevertheless, is in the main street of the town. Many of them contain from two to seven or eight women; and there are about a dozen such houses. The remainder of the women have independent private lodgings.

Prostitutes very lepraved. The prostitutes at Winchester have nearly all followed this occupation for some time. The practice of resorting to the chemist's shop for remedies of repute among this class is very common. The hospital is seldom sought, though they do not complain of the difficulty of getting admission, for the ministers of the parishes where these poor creatures chiefly congregate are most zealous in visiting their parishioners, and readily furnish hospital recommendations to those who ask it. The main reasons assigned for not going to hospital are, that they are seldom ill enough; and it is not worth while to go to the trouble of getting a letter, when they can cure themselves. The keepers of these resorts prefer to keep the women as long as they can be useful, and then send them away altogether. One person, when hard pressed, admitted that she sent girls when they were diseased to Portsmouth, in order to get rid of them, and preserve the credit of her house. For some time past the beds set apart for venereal cases—in the Hants County Hospital, six male and six female—have not been full, and very few women care to attend as out-patients. There is a Refuge for Fallen Women, and about fifteen to twenty pass through this institution yearly. Of these, nine out of ten are said to be diseased; this condition being possibly a main inducement to them to enter the reformatory.

Diseased women sent to Portsmouth.



Among the garrison, the proportion of the hospital admissions which is due to venereal disease is very large. In 1866, 991 men entered the garrison hospital; 228 of these were venereal patients. In 1867, the total was 799, and the proportion of venereal 200, equal to about 25 per cent. of the whole admissions.

Mr. Hill.  
Much disease among the Garrison—one-fourth.

The point of greatest interest respecting Winchester is the very manageable number of persons who are the main distributors of venereal disease. They are known to the police, the clergy, and medical men occupied with the poor; and there is to a certain extent hospital accommodation of which they will not take the trouble to avail themselves. They, nevertheless, are constantly receiving and propagating venereal disease among the population of the town, and that of the country when attracted to Winchester on market-days. Compulsory power to send this knot of women when infected to hospital would check the propagation of disease in Winchester, if not entirely, yet almost wholly; and, were its further importation arrested by the simultaneous action of preventive measures in all large towns, the population would escape its effects almost altogether. Further evidence, which Mr. Hill has collected, induces him to believe the number of prostitutes even in large cities to be greatly over-estimated. On the other hand, he has found that very nearly all these women are frequently affected with contagious disorder; and this circumstance, since no class refrains from communication with them, causes the present enormous spread of disease among society.

Those liable to be diseased well known to police.

Number not unmanageably great.

The clergy and gentry of Winchester are most earnest in their endeavours to abate this evil. During the passing of the Contagious Diseases Act in 1866, the townspeople of Winchester sent up a special petition to be included in the districts named in the Act, but were unfortunately a day too late. The extension of the Act to Winchester is greatly desired by the clergy of that city.

Clergy of Winchester anxious for Act.

*Windsor* strongly resembles Winchester, for here also is a small body of troops—namely, about 900 men—and a town population. The prostitutes are an extremely low class, quite as vicious and degraded as in Chatham, and lodge in twos and threes in the beershops or in lodging-houses hard by. The women do not migrate much, but many are not bred and born in Windsor. The ages of the girls range between fourteen and twenty-three years, and they remain for several years following this occupation. Some marry, and now and then even make exemplary wives. On the other hand, instances of fearful destitution are not unknown. Last summer, four or five girls betook themselves to the Park, where they camped out, being visited there by the soldiers, and living on odds and ends the men brought them, not unfrequently part of their rations concealed in their caps. The indecent behaviour of these girls at length rendered them so notorious that they were removed, two being put into a reformatory; where, however, they stayed only till Windsor Fair time and then absconded. They all seem to get venereal disease sooner or later; and, though unwilling to acknowledge it, nearly all confessed that they had had something. Their custom is to neglect their malady, or treat it with purges and lotions, until it either disappears or becomes so severe that they are no longer able to move about, when their landladies turn them adrift, and they go to the workhouse. Here they usually remain till well of the local disorders; but more than one instance was narrated of girls leaving the workhouse

WINDSOR.

Women much degraded.

Disease affects nearly all;



Mr. Hill. long before they ceased to be dangerous to others. One girl of seventeen had left her home two years ago. Last autumn she became diseased, and nevertheless continued to receive men for a month or more. During this time, she knows that she gave two soldiers disease, and perhaps civilians also. She went into the workhouse for seven weeks, and was confined of a still-born baby while there. On boxing-day, she came out, partially recovered. She could not tell how many men she had received since Christmas. Her face, neck, and wrists were marked with papulo-sealy eruption, and she was hoarse with sore throat; in fact, she made no secret of her disease.

No Hospital: There is no hospital at Windsor. The women may attend as out-patients at the dispensary, or go into the workhouse infirmary. At the former institution there is a large number of venereal patients, chiefly men and married women; and thirty prostitutes were admitted into the workhouse last year with venereal disease. Of the number of children dying through inherited syphilis, no estimate could be gathered from the surgeons or the police.

The women, when questioned, asserted that they would have no reluctance to being examined as often as was necessary, "provided all were served alike;" and the prospect of a hospital for them to go into was delightful, even though it would become compulsory to remain there till well. The hospital, they remember, would, at any rate, provide for them until they recovered their health.

No accommodation at all exists for the reception of men in Windsor while suffering with venereal disease. This town is, like Winchester, one which presents no difficulty to the operation of the Contagious Diseases Act. It is, moreover, one of those towns included in the schedule. [Since this article was written, the War Office has engaged 20 additional beds at the Lock Hospital, in London, to receive patients from Windsor.]

A druggist of the town said he sold plenty of medicine for venereal disease to Life Guardsmen. These men are more highly paid than other soldiers, and frequently prefer to treat their disease independently of the surgeons of their regiment, by whom, nevertheless, a large number are also treated. In 1867, while one of these regiments was at Windsor, 103 men were admitted into hospital, thirty-five of them with venereal disease.

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*EXTRACT from the Report on the Health of the Navy, ordered by the House of Commons to be printed, 5th August, 1867, p. viii.*

Improved health of the Navy. "Although the time that has elapsed since the present Act came into force is too short to admit of much being said in respect to the results that are likely to be derived from it, there can be no question that, up to the present time, it has proved of marked advantage; more so, perhaps, in some localities than others. The difference in the practical results obtained from the measure in different localities arises mainly from the greater or less accommodation afforded at the various places for carrying out the provisions of the Act, and also, doubtless, from the unfortunate proximity of certain of the localities included in the schedule, to large cities to which this special law does not extend. To illustrate, however, the effect which the measures adopted have had in lessening the amount of disease at one seaport, the

following Table has been compiled, showing the mean strength of the Head Quarters of the Royal Marine Division at Plymouth during the different quarters of the years 1864, 1865, 1866, and the six months of 1867, included in this Abstract; the number of cases of primary syphilis occurring among the men of the division, and treated either in the Marine Infirmary or the Naval Hospital; and the ratio per 1,000 of mean force.

“ By drawing up a Table in six-monthly periods, it will be seen how progressive has been the decrease of disease from the first six months of 1864, when no Contagious Disease Act existed, until the first six months of 1867, when the new and more extended Act had been in operation for a short time. Thus:—

SIX-MONTHLY PERIODS.	Mean Force.	No. of Cases.	Ratio per 1,000 of Mean Force.	Diminution during 3½ years.
First Six Months of 1864, . .	1,642	213	129·7	
Second „ „ . .	1,690	203	120·1	
First „ 1865, . .	1,707	179	104·8	
Second „ „ . .	1,513	154	101·7	
First „ 1866, . .	1,685	105	62·3	
Second „ „ . .	1,788	108	60·4	
First „ 1867, . .	1,581	78	49·3	

### SHEERNESS.

(Table drawn up for the Lords of the Admiralty.)

Entries for Disease amongst the Soldiers, Sailors, and Women during the Second half of 1867.

1867.	DISEASED.				STRENGTH.				Per Centage Diseased.
	Women.	Soldiers.	Sailors.	Marines.	Total Strength.	Soldiers.	Sailors.	Marines.	
July, .	1	2	—	—	1520	438	1082	—	·13
Aug. .	6	33	4	—	1772	666	1106	—	2·68
Sept. .	9	12	—	—	1828	725	1103	—	·66
Oct. .	2	13	—	—	2112	816	1296	—	·61
Nov. .	2	13	3	—	2280	734	1546	—	·70
Dec. .	6	22	2	—	2540	687	1853	—	·94

Sheerness—very little disease left.

REMARK.—At the end of July only three men were suffering, and no women. Early in August 600 men came from Worley, a number of them diseased, and these infected the women, hence the increase in the September entries.

# EFFECT OF PREVENTIVE MEASURES IN MITIGATING THE SEVERITY OF VENEREAL DISEASE AND FACILITATING ITS TREATMENT.

ABSTRACT of a Paper published in the *British Medical Journal*, February 15th 1868, by Mr. JAMES R. LANE, F.R.C.S. Senior Surgeon to the LONDON LOCK HOSPITAL; Surgeon to ST. MARY'S HOSPITAL.

Mr. Lane.

" This paper contains important evidence concerning the good effect of the Contagious Diseases Act on the female patients admitted into that institution. The hospital has 30 beds supported by charitable contributions for women applying voluntarily, and 100 beds supported by Government for patients from Woolwich, Chatham, and Aldershot, and therefore affords a good opportunity of contrasting the character of the disease under the voluntary, and under the compulsory systems.

Contrast between Government and ordinary patients.

" The average period of stay in hospital was, in 1867, for Government cases, 34.5 days, for ordinary patients, 50 days.

" The severer forms of venereal disease constituted 80 per cent. of the ordinary, but only 41.5 per cent. of the Government cases.

Constitutional Syphilis in Government patients only 13 per cent.; in ordinary patients 43 per cent.

" The proportion of the Government patients suffering with disease penetrating the whole constitution, was only 13 per cent., of ordinary patients, 43 per cent.

" In many other respects the inspection and early treatment of prostitutes is shewn to have greatly lessened the severity of their disorder, and to have much diminished the number suffering from those forms of disease which infect the constitution, and which may be communicated from husband to wife, and from parent to offspring.

" The above figures, however, do not express the whole benefit which the Contagious Diseases Act confers on the localities of its operation, for at Aldershot and Chatham, where a certain number of beds are provided for the women in local hospitals, besides those retained in London, the surgeons are instructed to send to town the women the severity of whose disease will require the longest stay in hospital, in order to keep down the cost of transit to and fro.

Venereal disease much less in Woolwich.

" In Woolwich important testimony is gained from druggists who sell remedies for venereal complaints; shewing that the Act has had a marked effect in diminishing disease amongst the civil population. These persons find the demand for such medicines has very greatly declined, and that they can cure these complaints by much simpler means than were necessary before the Act came into operation."

## THE LIMITATION OF CONTAGION.

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EXTRACT from the *British Medical Journal*, February 29th, 1868.

In "an Act, to make the Poor Law Board permanent, and to provide sundry amendments," &c., passed last session, there is a highly important clause, intended to check venereal disease. Under this Act, boards of guardians can on a certificate of their medical officer, retain in the workhouse under treatment any poor person suffering from enthetic disease, so long as he is "not in a proper state to leave the workhouse, without danger to himself or others." This Act is applicable to the country as well as to London. This clause was, we believe, inserted in the Act at the instance of a board of guardians; for the very purpose of enabling them to take measures in this way for preventing the spread of venereal diseases. The power which this Act places in the hands of guardians, if generally applied throughout the country, would go far towards effecting one of the objects of the Association, which is now being formed with a view to endeavour to reform our present management of the social evil. The persons, especially women, affected with enthetic diseases, who take refuge in workhouses, may, if the guardians so please, be now legally retained there, until, in the opinion of the medical officer, they may be permitted to depart without danger to the community. The words of this clause in the Act, quoted at length, are as follow:—

"When there shall be in any workhouse a poor person suffering from mental disease, or from bodily disease of an infectious or contagious character, and the medical officer of such workhouse shall, upon examination, report in writing that such person is not in a proper state to leave the workhouse, without danger to himself or others, the guardians may direct the master to detain such person therein; or, if the guardians be not sitting, the master of the workhouse may, until the next meeting of the guardians, detain him therein; and such person shall not be discharged from such workhouse until the medical officer shall, in writing, certify that such discharge may take place; provided, however, that this enactment shall not prevent the removal of a lunatic to a lunatic asylum, registered hospital, or licensed house, when such removal is otherwise required by law, nor the removal of any poor person, after the parent or next of kin of such person shall have given to the guardians such an undertaking as they shall deem satisfactory, to provide for the removal, charge, and maintenance of such person with due care and attention while the malady continues; and this provision shall apply to every district school and district asylum, and to the managers, board of management, medical officer, superintendent, or master thereof respectively."

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No. IV.

THE REFORMATION OF PROSTITUTES.

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Mr. Lane.

There is attached to the Lock Hospital, the Lock Asylum, which all patients may enter when they leave the hospital, if they wish.

In 1867, 34 Government patients and 42 ordinary patients entered the Asylum, whence 16 have left at their own request; 8 have been restored to their friends; 52 remain in the Asylum. During 1867, the Asylum placed 18 of its inmates in good situations, and 13 were restored to their friends. A large proportion of them received sums of money on leaving, as rewards for good conduct and industry.

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Rector of  
Chatham.

*Report of a Meeting of the Beneficed Clergy at Chatham.*

ST. MARY'S, CHATHAM, January 14th, 1868.

"DEAR SIR,

"The result of the Meeting convened by myself last week at Chatham, to consider the propriety of extending to the Kingdom at large, 'The Contagious Diseases Act of 1866,' was all but unanimously in favour of that measure.

"The Meeting was attended by almost all the beneficed Clergy of the Towns, by several of the Chief Medical Officers of the Garrison, and by a good many of the laity besides.

"After an animated discussion of nearly two hours, in which almost every one present took part, we arrived at the conclusion that, from the experience of the last two years, during which the Act had been in operation, its extension throughout the Kingdom was highly desirable, as tending to mitigate to a very great degree one of the most frightful diseases that afflict humanity.

"The obvious moral objection to the Act that it removes one chief deterrent from the sin of fornication, viz. the fear of contagion, was greatly modified to the minds of the Clergy present by the experience of the Rev. J. G. BAILEY, the Chaplain of St. Bartholomew's Hospital, Chatham, who stated his conviction that the Act was the means of bringing under religious and moral instruction many scores of degraded women, who had never been under such influence before; and that, during his Chaplaincy of only ten months, no less than thirty-nine of these unfortunates had been restored to their homes, or induced to enter Reformatory Institutions.

"At the same time, I am bound to state on behalf of myself and my brother Clergy, that while in favour of the Act, as it at present stands, we should altogether deprecate its conversion into an instrument hereafter for the introduction into England of the 'Continental System' of legalized and licensed prostitution.

Believe me, DEAR SIR,

Yours very truly,

A. R. WEBSTER,

Rector of St. Mary's, Chatham.

BERKELEY HILL, Esq.

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Meeting of  
Clergy at  
Chatham.

Rev. J. G. Bailey.



ST. PETER'S HOUSE, ROCHESTER,

February 8th, 1868.

"DEAR SIR,

"Having had opportunities of seeing the working of the 'Contagious Diseases Act of 1866,' I have reason to believe that it has worked thoroughly well, so far as it goes; not only in hindering the spread of disease, but also in bringing under instruction and good influences, as well as offering an opportunity of reformation, to a class, that has been too much neglected; and which, perhaps, could not possibly be reached in any other way. I am, however, strongly opposed to the provision that gives the certificate of health to the woman. Incumbent of St. Peter's.

"I should wish to see the Act extended to all garrison towns at once, as until this is done, it must partially fail of its intended effect. If the Act is extended to the civil population, I trust that the present provision, by which only suspected women are brought up for examination, will be left untouched. I should look on any *enforced periodical* examination as a great evil, for reasons which I will not occupy your space in stating at length.

I am, yours faithfully,

H. F. PHILLIPS,

Incumbent of St. Peter's, Rochester.

BERKELEY HILL, Esq.

H.M. DOCKYARD, PORTSMOUTH,

29th December, 1867.

"DEAR SIR,

"I fear that I cannot afford you any reliable information on the subject you wish; but I quite agree with you that it is desirable to extend the operation of the Act." Chaplain of Portsmouth Dockyard.

I am, DEAR SIR,

Yours truly,

EDWARD S. PHELPS,

Chaplain.

BERKELEY HILL, Esq.

EXTRACT from the Appendix to the Official Report of the Committee on Venereal Diseases in the Army and Navy.

## REGULATIONS OF PARIS.

"It is shewn from the statistics of four years, published in the year 1864, that out of 1934 clandestine prostitutes who had been arrested, 1125 were restored to their friends; in other words, that a large number of women, who for the most part were victims of seduction, want, or their own inexperience of the arts of vicious men, were rescued from vice, and restored to their families. Rescue of Young Girls at Paris.

“ If to these, we add, 123 at the Maison de St. Lazare, and 65 at the Convent de la Madeleine, detained as a punishment for insubordination to parental authority, for which they are amenable to the French laws ; and the 120 cases of itch sent to the hospitals, we have a total of 1433 women rescued from prostitution out of 1934 arrested. 250 only had to be registered at the time, and the remainder, being affected with venereal diseases, were sent to St. Lazare for treatment, a relative proportion of whom were reclaimed.

“ These figures contain an answer to the objection which has often been raised, that these women are only taken away from the streets for a time, since the number registered in each year only amounts to about 270.”

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#### THE AGE AND OCCUPATION OF GIRLS WHO FALL INTO PROSTITUTION.

Rescue Society. *Extract from the 14th Report of the Rescue Society, March 31, 1867, p. 70.*

“ Of 526 fallen girls under the care of the Society in the preceding year, 381 were not over 17 years ; 108 were not more than 12 years old ; (one was a child of 5 years), at the time of their fall.

“ Respecting their occupation. Of the 526, 419 had been domestic servants, 32 had been living at home with their parents, and the rest of multifarious occupations.”

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# BALANCE SHEET OF INCOME AND EXPENDITURE.

HENRY SPENCER SMITH, *Treasurer, in account with THE ASSOCIATION FOR EXTENDING THE CONTAGIOUS DISEASES ACT, 1866,*  
 TO THE CIVIL POPULATION, *from November 27th, 1867, to May 27th, 1868.*

*Dr.*

*Cr.*

To amount of—	£.	s.	d.	£.	s.	d.
Annual Subscriptions ...	...	45	3	0		
Life Subscriptions ...	...	65	2	0		
Donations ...	...	24	18	0		
				135	3	0
By Preliminary and Secretaries' Expenses ...	...	28	5	4		
By Expense of Meeting at Gravesend ...	...	2	14	0		
By Printing, Stationery, Advertising, and Reporting ...	...	63	0	2		
					93	19
Balance ...	...	...	...	...	41	3
					£.135	3
					0	

May 28th, 1868.

Examined with the Vouchers, and found correct,

JOHN W. BATTEN,  
 ARTHUR B. R. MYERS, } *Auditors.*

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